

1.0 Policy Statement

Individuals with mental retardation/developmental disabilities and mental health and/or substance abuse co-occurring disorders may require integration of the disorders with respect to specific and focused respite/acute stabilization activities.

2.0 Policy Guidelines

2.1 General Service Requirements

Services provided to individuals with mental retardation/developmental disabilities and mental health and/or substance abuse co-occurring disorders are subject to the requirements and limits specific to the service or procedure they are receiving. Services may be provided in the settings indicated in the policy for the specific service or procedure that the individual is receiving.

(Refer to the individual clinical coverage policies online at <http://www.dhhs.state.nc.us/dma/mp/mpindex.htm> for service-specific information.)

2.2 Assessment

The assessment should focus on defining the relationship between disruptive behaviors and responses to a range of physiological changes, environmental events, or personnel changes. The assessment should be consistent with the requirements of the Diagnostic/Assessment service or other federally mandated requirements. It should be administered and interpreted by qualified disability specific and/or clinically appropriate professionals.

2.3 Person-Centered Plans

The PCP must be directed toward the acquisition of the following:

1. Behaviors necessary for the individual to function with as much self-determination and independence as possible.
2. Prevention or deceleration of regression or loss of current optimal functional status.
3. Improvement in target behaviors or psychiatric symptoms (including but not limited to DSM-IV-TR criteria) should be addressed. Monitors for symptomatic or behavioral improvement and a review of medication side effects are included in the PCP.

4. The PCP should include both behavioral interventions and the parameters for psychotropic drug use. If pharmacotherapy is used in the PCP, appropriate monitors should include a review of side effects and other adverse events that may affect quality of life or cognitive functioning.

2.4 Treatment

Mental illness/substance abuse behaviors can be a primary cause of behavioral regression, and a substantial impediment to effective behavioral interventions. For individuals with mental retardation/developmental disabilities and mental health/substance abuse co-occurring disorders, treatment is defined as an initial biopsychosocial assessment (i.e., behavioral, psychiatric, maladaptive behaviors, and biomedical issues) and the development and implementation of an individual person-centered plan (PCP) that focuses on relieving target symptoms and core features of their disorder(s).

2.5 Reviews and Reassessments

Individuals with mental retardation/developmental disabilities and mental health/substance abuse co-occurring disorders may require specialized services that are established in the initial assessment and documented in the PCP. Since many psychiatric illnesses and /or maladaptive or behavioral disorders have a finite duration, appropriate review and reassessment by qualified treatment team members should occur at 3-month intervals. The results of this review should be made available to the consumer, their legal representative, and treatment team members.

2.6 Psychotropic Drugs

For individuals with mental retardation/developmental disabilities and mental health/substance abuse co-occurring disorders, all psychotropic drugs should be reviewed within 30 days of admission and at a minimum of 3-month intervals thereafter by a multidisciplinary team including at a minimum a physician and pharmacist.

Reviews include type of medication, evidence for effectiveness for the psychiatric disorder, monitors for medication side effects, and operationalized symptom monitors to measure improvements. Subsequent to this assessment, review of the PCP and medication should occur at 3-month intervals.

3.0 Policy Implementation/Revision Information

Original Effective Date: July 1, 2006

Revision Information:

Date	Section Revised	Change